PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number .			
Effective October 1, 2003)	Nak	٥٢	م	
									0 1)	<u>ŏ'</u>	737	112
	CLAIMS AS FILED - PART I (Column 1) (Column 2)								ENTITY		OTHE	R THAN
1	OTAL CLAIM	s 3.	1 (Colons				1	TYPE	<u> </u>	_OR	SMALL	ENTITY
- -	 OR		1					RATE		4	RATE	FEE
II			NUMBE	R FILED	NUL:	Ber extra ——————	١.	BASIC F	335.00) 	BAS:2 FEE	746.62
Ľ	OTAL CHARGE	ABLE CLAIMS	1300	minus 20=		12		XS 9=		OR	XS18=	211
iΝ	DEPENDENT (CLAIMS	3	3 minus 3 =		3		X43=		-	X86=	416
М	ULTIPLE DEPE	NDENT CLAIM F	PRESENT							JOR	7002	
• If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=	
•								TOTAL		OR	TOTAL	926
	CLAIMS AS AMENDED - PART II (Column 3)							4			OTHER	
	A001-	CLAIMS HIC			EST			SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT		REMAINING :		PREVIC		PRESENT :	ŀ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
		AMENDMENT:		PAID	FOR	-		<u></u>	FEE	4		FEE
	Total	32	Minus	-3	32	=		X\$ 9=	_	OR	XS18=	
AM	Independent	ENTATION OF W	Minus	1 - 2	2	<u> </u>		X43=		OR	X86≈	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1			
•		,	•		-//	2/1	جز	+145= TCTAL	 	0-	-290=	
		(Cat.,			ンル	210		DDIT, FEE		JOR	TOTAL ADDIT, FEE	L
Γ	1	(Column 1)	T	(Colum		(Column 3)	-م ا			_		l
AMENDMENT B		REMAINING AFTER		NUMB	ER	PRESENT			ADDI-			ADDI-
		AMENDMENT	·	. PREVIO PAID F		EXTRA	ŀ	RATE	TIONAL		RATE	TIONAL FEE
	Total	. 32	Minus	1-3	7	=		XS 9	Total	OR	X\$18=	-1,161
	Independent	. 3	Minus		3	•		 X43≛ ≥	magner	ient		15.11
Ļ	FIRST PRESENTATION OF MULTIPLE D			PENDENT			X43= 7	7	ÓΒ	-X86= -		
	•						ľ	+145=		OR	+290=	
		•					A	TOTAL DOIT, FEE		OR	TOTAL	
-	(Column 1) (Column 2) (Column 3)									•		
AMENDMENT C		CLAIMS REMAINING		HIGHE NUMB	-	PRESENT	Γ		ADDI-	[ADDI-
		AFTER AMENDMENT	·	PREVIOU PAID F		EXTRA	1	RATE	TIONAL		RATE	TRONAL
	Total	•	Minus	••	-	·=	+	 X\$ 9≃	FEE	1	· · ·	FEE
	Independent	•	Minus	***		=	-	~ 3 ∃=		OR	X\$18=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43= !		OŘ	X86=	<u> </u>
										OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										UB I	TOTAL	
	i ine rudnesi kui	mber Previously Paid ber Previously Paid	d For IN THE	C CD400 11			AE four-	OOT. FEE	Novine ha		DOTT. FEE!	:
						August services.			MANAGE DO	ian COK	F141 4.	•

Application or Docket Number .